



Names of Parent(s) : (Father) Mr. \_\_\_\_\_  
Contact Tel. \_\_\_\_\_ (day) \_\_\_\_\_ (night)  
(Mother) \*Mrs./Ms. \_\_\_\_\_  
Contact Tel. \_\_\_\_\_ (day) \_\_\_\_\_ (night)

Parent's Residential Address: \_\_\_\_\_  
\_\_\_\_\_

If the applicant is not living with parent(s), please state since when and give the reason(s) and also provide the name of the person with whom the applicant is living at present.

Date since not living with parents: \_\_\_\_\_

Reason(s) : \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Name of the person with whom applicant is living with :(\*Mr./Mrs./Miss) \_\_\_\_\_

Tel \_\_\_\_\_ (day) \_\_\_\_\_ (night)

Other details to support your application (*use separate sheet if necessary*)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\* Delete as appropriate

.....

**I have declare that the information provided above is accurate and authentic and will provide any related document for verification as requested. I also understand and agree that the information shall only be used in relation to my application for hostel accommodation and kept confidential by Shaw College.**

Applicant's signature : \_\_\_\_\_

Date : \_\_\_\_\_

逸夫書院專用

收件人簽署: \_\_\_\_\_

請填寫宿舍選擇：（請於適當處加“✓”號）

宿舍： 逸夫宿舍  國際生舍堂（資料見附件） 性別： 男  女

姓名	學系/年級	學號	聯絡電話	簽名
(中文)				
(英文)				

日期: \_\_\_\_\_

註: 同學申請雙人房日期為2008年7月24日至8月6日。